



Applicant:

Bruce A. Scheffer et al.

Group No.:

2854

Serial No.:

09/161,194

Batch No.:

Z99

Filed:

September 25, 1998

Examiner:

Eugene Eickholt

For:

METHOD AND APPARATUS FOR

EFFECTING SHINGLING OF

CONVEYED PRINTED PRODUCTS

I hereby certify that this paper is being Deposited with the United States Postal Service as Express Mail in an envelope addressed to: Assistant Commissioner for Patents,

Washington, DC 20231, on this date:

Attorney

Docket No.

74047

7/7/1999

Date

Express Mail No.

EM509795559US

**Box ISSUE FEE** Assistant Commissioner for Patents Washington, D.C. 20231

Sir:

I hereby certify that the attached Fee Transmittal, Issue Fee Transmittal, Amendment Under 37 CFR § 1.312 and Supplemental Declaration for Utility or Design Patent Application (38 CFR 1.63) are being deposited with the United States Postal Service via Express Mail under the aboveidentified Express Mail Number in an envelope addressed to: Box Issue Fee, Assistant Commissioner for Patents, Washington, D.C. 20231, on this date.

July 7, 1999

Richard L. Wood

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PTO/SB/17 (12-98)
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## TRANSMIT for FY 1999

Patent fees are subject to annual revision. Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

TOTAL AMOUNT OF PAYMENT

(\$) 605.00

Complete if Known				
Application Number	09/161,194			
Filing Date	09/25/98			
First Named Inventor	Bruce A. Scheffer			
Examiner Name	E. Eickholt			
Group / Art Unit	2854			
Attorney Docket No.	74047			

METHOD OF PAYMENT (check one) FEE CALCULATION (continued)							
1. The Commissioner is hereby authorized to charge Indicated fees and credit any over payments to:  Deposit  The Commissioner is hereby authorized to charge Indicated fees and credit any over payments to:  See Fee Fee Fee Fee Fee Fee Code (\$) Code (\$)  See Fee Fee Fee Fee Fee Fee Fee Fee Fee							
Account	105 13			Surcharge - late fi	ling fee or oath		
Number Deposit Account Name	127 5	50 22	7 25		rovisional filing fee or		
Charge Any Additional	139 13	30 13	9 130	Non-English speci	fication		
Fee Required Under 37 CFR 1.16 and 1.17		20 14	7 2,520	For filing a reques	t for reexamination		
2. Payment Enclosed:	112 92	20* 1	12 920*	Requesting public Examiner action	ation of SIR prior to		
Money Other	113 1,84	40° 1	13 1,840	<ul> <li>Requesting public Examiner action</li> </ul>			
FEE CALCULATION	115 11	10 21	5 55		within first month		
· · · · · · · · · · · · · · · · · · ·	116 38	80 21	6 190	Extension for reply	within second month		
1. BASIC FILING FEE Large Entity Small Entity	117 87		7 435		within third month		
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	118 1,36	60 21	8 680	Extension for reply	within fourth month		
101 760 201 380 Utility filing fee	128 1,8	50 22	8 925	Extension for reply	within fifth month		
106 310 206 155 Design filing fee	119 30	00 21	9 150	Notice of Appeal			
107 480 207 240 Plant filing fee	120 30	00 22	0 150	Filing a brief in su	• .		
108 760 208 380 Reissue filing fee	121 26	60 22	1 130	Request for oral h	-	.	
114 150 214 75 Provisional filing fee	138 1,51	10 13	8 1,510		a public use proceedi	ing	
	140 11	10 24	0 55	Petition to revive -	unavoidable		
SUBTOTAL (1) (\$)	141 1,21	10 24	1 605	Petition to revive -	unintentional		
2. EXTRA CLAIM FEES	142 1,21	10 24	2 605	Utility issue fee (or	r reissue)	605.00	
Fee from Ext <u>ra Claims below Fee Paid</u>	143 43		3 215	Design issue fee			
Total Claims20** = X =	144 58			Plant issue fee			
Independent - 3** = X = X	122 13		2 130	Petitions to the Co	mmissioner		
Multiple Dependent	123 . 5			Petitions related to	provisional application	ns	
**or number previously paid, if greater; For Reissues, see below	126 24	10 12	6 240	Submission of Info	rmation Disclosure Str	mt	
Large Entity Small Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	581 4	40 58	1 40		atent assignment per mber of properties)		
103 18 203 9 Claims in excess of 20	146 76	50 24	6 380		n after final rejection		
102 78 202 39 Independent claims in excess of 3	149 76	60 24	9 380	(37 ČFR 1.129(a)) For each additiona			
104 260 204 130 Multiple dependent claim, if not paid				examined (37 CFF			
109 78 209 39 ** Reissue independent claims over original patent							
110 18 210 9 ** Reissue claims in excess of 20 and over original patent		Other fee (specify)					
SUBTOTAL (2) (\$) · Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 605.00							
SUBMITTED BY Complete (if applicable)						pplicable)	
Typed or Printed Name Pichard L. Wood, Esq.				Reg. Number 22,839			
Signature Kichand Thorn			Date	7/7/99	Deposit Account User ID		

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